

HIV/AIDS in Pakistan and USAID Involvement

Pakistan presently has a low HIV/AIDS prevalence of 0.1 percent—equivalent to an estimated 80,000 HIV-positive adults. HIV has been reported in all four provinces of Pakistan, and is spread predominantly through sexual contact, which accounts for 70 percent of registered HIV cases. Another 19 percent of HIV cases are attributed to exposure to contaminated blood or blood products. Pakistan has not implemented a universal blood screening system; in 1994, only an estimated 10 percent of the total blood supply was properly screened for HIV. The third most common route of HIV infection is injecting drug use, which accounts for 4 percent of cases, followed by mother-to-child transmission, which accounts for 1.3 percent of cases.

When HIV first appeared in Pakistan in the late 1980s, the majority of cases were found among non-Pakistanis in Karachi, Pakistan's largest city. The first AIDS case was reported in 1987 in a foreign sailor. It became public belief that Pakistanis could not be infected with HIV because of their strong moral, religious, and cultural traditions. This belief has fueled Pakistan's reluctance to address high-risk behaviors associated with HIV infection.

From 1990 to 1995, an increasing number of Pakistanis who traveled or lived abroad became infected with HIV, returned to Pakistan, and spread the disease within the country. The first recognized case of a mother infecting her child through breastfeeding occurred in 1993.

From 1995 to 1999, HIV/AIDS emerged in populations at high risk of infection, including sex workers, injecting drug users, and prison inmates. Infections among the general population also began to rise during this period. Migrant laborers and transport workers were identified as high transmitters of HIV along major trade routes, and inadequate sterilization of medical equipment has contributed to the broadening of the epidemic.

- As of September 2000, 1,501 HIV cases had been reported to the Pakistani National AIDS Programme. Widespread underreporting and limited care-seeking by HIV-infected persons account for the wide gap between reported and estimated HIV/AIDS cases.
- 87 percent of reported HIV cases occur in men.
- 52 percent of HIV cases occur among 20- to 40-year-olds.
- 63 percent of Pakistan's population is under the age of 25; this population is at highest risk of infection.



- The male-to-female ratio for HIV infection is 6.9:1; the male-to-female ratio for AIDS cases is 7.8:1.

According to the Joint United Nations Programme on HIV/AIDS (UNAIDS), a number of factors could facilitate the spread of HIV/AIDS in Pakistan, including:

- A high population density of 179 people per square kilometer;
- High rates of labor migration both within and outside the country;
- The presence of an estimated 1.2 million Afghan refugees with low levels of access to care and HIV education materials;
- A thriving commercial sex industry. A 1996 study indicated that only 60 percent of Pakistani sex workers had ever heard of AIDS, and of this 60 percent, only 44 percent knew that HIV could be transmitted via sexual contact;
- Presence of injecting drug use;
- Low rates of condom use;
- Stigma and discrimination associated with certain behaviors leading to HIV transmission, which impede access to HIV/AIDS information and services; and

- Low literacy and low social status of women, which makes them more vulnerable to HIV infection.

NATIONAL RESPONSE

The National AIDS Programme (NAP) was established in 1987 after the first HIV/AIDS case was diagnosed. Initially the NAP focused on development of laboratory services and surveillance capacity, but later placed higher priority on developing program management structure, and information, education and communication efforts.

In 1990, the first government-funded HIV/AIDS program plan was developed and budgeted for three years. Since 1996, funding for the NAP has dropped markedly. For example, in 1997-1998, the Government of Pakistan allocated \$816,000 for the NAP, but only 50 percent of this amount was released. For 1998-1999, \$1,020,408 was allocated, but only 44 percent was released.

Despite low levels of funding, the NAP has:

- Established AIDS control and safe blood transfusion units in four provinces and two federally administered areas;
- Implemented an HIV/AIDS public awareness-raising initiative;
- Established 39 HIV/AIDS surveillance and diagnosis centers;

Key Population, Health, and Socioeconomic Indicators		
Population	150.6 million	DHS 2000
Growth Rate	2.8%	DHS 2000
Life Expectancy	Male: 60 Female: 62	Census Bureau 2000
Total Fertility Rate	5.6	DHS 2000
Infant Mortality Rate	71 per 1,000 live births	UNICEF/UNPOP 1999
Maternal Mortality Rate	340 per 100,000 live births	Human Development in Southeast Asia Report, 1997
GNP per capita (US\$)	470	DHS 2000
Govt. health expenditure as % GDP	4.0%	WHO 1997
Adult Literacy	Male: 51% Female: 28%	Economic Survey 1997-98, Finance Division, GOP

- Implemented national policies for screening blood prior to transfusion;
- Developed national guidelines on blood transfusion safety and standard operation procedures;
- Conducted an estimated 300 training workshops and meetings on different aspects of HIV/AIDS since 1987; and
- Developed HIV/AIDS-related policy reform and budget plans up to year 2002.

In 1997, the Ministry of Labor and Manpower's Directorate of Worker Education, sponsored by the World Health Organization, implemented a series of 23 national HIV/AIDS awareness-raising seminars for factory workers. More recently, the Ministry began a national project designed to provide HIV/AIDS information to organized workers.

The Ministry of Education is awaiting approval for a new National Education Policy to include HIV/AIDS education at the secondary level.

The Anti-Narcotics Force of the government's Narcotics Control Division has implemented workshops in Punjab and Sindh to encourage non-governmental organizations (NGOs) to develop community-based HIV/AIDS prevention initiatives and activities to reduce drug demand.

In 2001, Pakistan launched an AIDS awareness campaign to address social taboos that have silenced public discussion on the potential HIV/AIDS crisis. The popular musician, Salman Ahmad, is participating in the campaign as a way to reach younger audiences.

USAID/DONOR SUPPORT

The **United States Agency for International Development** (USAID) is presently not allocating funds to Pakistan for HIV/AIDS programs.

However, several United Nations agencies, the World Health Organization, and the World Bank are implementing HIV/AIDS projects. Bilateral donors

include the European Commission, Japan, Norway, the United Kingdom, and the Netherlands.

CHALLENGES

Pakistan is at a crucial stage in its HIV/AIDS epidemic; health care professionals and policymakers agree that it is still possible to keep the epidemic at bay in many regions.

According to the Ministry of Health and UNAIDS, Pakistan faces the following challenges in responding to the epidemic:

- Developing multisectoral approaches to HIV/AIDS at all levels, and an increased national response;
- Decreasing the risks related to an unsafe blood supply and blood products;
- Targeting effective approaches to groups at high risk of HIV infection, including services to treat and prevent sexually transmitted infections;
- Increasing an effective HIV/AIDS monitoring system and an enhanced research program;
- Increasing public awareness of HIV/AIDS; and
- Improving care and support for people living with HIV/AIDS.

SELECTED LINKS AND CONTACTS

1. Office of UNAIDS Country Programme Adviser, Saudi-Pak Tower, 61-A Jinnah Avenue, Islamabad, Pakistan, Tel: (92-51) 2276883, or (92-51) 2279165, Fax: (92-51) 2271866.
2. National AIDS Programme, National Institute of Health, Chak Shahzad, Islamabad, Pakistan, Tel: (92-51) 9255096, 9255241, 9255242, Fax: (92-21) 7771753.
3. UN Resident Coordinator: Onder Yucer, PO Box 1051, Saudi Pak Tower, 61-A, F-7, Jinnah Avenue, Islamabad, Pakistan. Tel: (92-51) 2822618, Fax: (92-51) 2279080, E-mail: rescoord@un.org.pk
4. UNICEF Representative: Carroll Long, PO Box 1051, Saudi Pak Tower, 61-A, F-7, Jinnah Avenue, Islamabad, Pakistan. Tel: (92-51) 2279160, Fax: (92-51) 2279161.

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